September, 2008.

09/689178

CATE OF MAILING

I hereby certify that this document is being deposited with the U.S. Postal Service, with sufficient postage, as first class mail in an envelope addressed to Mail Stop: Disclaimer, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on this 29th day of

Customer Number

24024

Typed or Printed name of person signing this certificate:

Judith A. Krahn

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

First Named	Inventor: Neven Karlovac	Examiner: Anthony Knight		
Patent No.:	6,983,236) Art Unit: 2121		
Issued:	January 3, 2006) Confirmation No.: 8291		
For:	METHOD FOR SYSTEM- CONSTRAINT-BASED SELECTION FOR DESIGN COMPONENTS) Attorney Docket No.: 15154.)))	.03901	

Mail Stop Post Issue Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

TRANSMITTAL OF DISCLAIMER

Sir:

Transmitted herewith are the following:

- 1. Disclaimer in Patent under 37 CFR 1.321(a) (PTO/SB/43) (1 pg + duplicate);
- 2. A check in the amount of \$130.00; and
- 3. A Return Receipt Postcard.

It is believed that no further fee is required relating to the filing of this document. If this is not the case, the Patent Office is hereby authorized to charge any related fee to Deposit Account No. 03-0172. A duplicate copy of PTO/SB/43 is attached.

By:

Respectfully submitted,

Date: September 29, 2008

Ryan Falk, Reg. No. 54,090

(216) 622-8206



PTO/SB/43 (08-08)

Approved for use through 09/30/2008, OMB 0851-0031--U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE. Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information untess it displays a valid OMB control number.

DISCLAIMER IN PATENT UN	IDER 37 CFR 1.321(a)	- 200	
ame of Patentee	Docket Number (Optional)		
Aprisa, Inc.	Date Patent Issued		
stent Number 6 , 983 , 236	January 3, 2006		
tile of Invention			
Method for System-Constraint-Based Selection	n for Design Components		
I hereby disclaim the following complete claims in the above identified patent:			
coop accusing the telephone accuse in the accuse in		895-7581 Semmer	
		מפיווער ופורים:	
•		,	
he extent of my interest in said patent is (if assignee of record,	state liber and page, or reel and frame, when	e ,	
ssignment is recorded): Assignee of record (Reel/F	rame: 015482/0892)		
he fee for this disclaimer is set forth in 37 CFR 1.20(d).			
Patentee claims small entity status. See 37 CFR 1.27.			
<u> </u>			
Small entity status has already been established in this ca	ase, and is still proper.		
X A check in the amount of the fee is enclosed.			
Payment by credit card. Form PTO-2038 is attached.			
The Director is hereby authorized to charge any fees which may be required or credit any			
overpayment to Deposit Account No.		The second	
		•	
WARNING: Information on this form may become put be included on this form. Provide credit card informa		:	
bo includes on this form. From the create early informa-	aon ana audionapaon on 1 10-2000.		
igned at Solon, State of Onco	this 24th day of September	20 00	
State of the state	, uns day or	20	
Olte astomas			
Signature	Registration Nur		
D 1 -	applicable	3	
Nita A. Ihomas			
Typed or printed name of patentee/ attorney or agen	t of record Telephone Nu	mber	
28925 Fountain Parkway			
·			
Address Solon, Ohio 44139	•		

This collection of Information is required by 37 CFR 1.321. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the complete depilication form to the USPTO. Then will vary depending upon the Individual case. Any comments on the amount of time you require to complete this form endors for reducing this burden, should be sent to the Chief information Officer, U.S. Patent and Trademerk Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

10/02/2008 CCHAU2 00000012 09689178

01 FC:1814

130.00 OP



PTO/SB43 (08-08)
Approved for use through 09/30/2008. OMB 0651-0331U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
to a collection of information unless it riterious a voil OMB control surface.

Inder the Paperwork Reduction Act of 1995, no persons are required to respond to a	cosecson or information unless a displays	a versi Cino contra number.		
DISCLAIMER IN PATENT UNDER 37 CFR 1.321(a)				
Name of Patentee	Docket Number (Optional)	1, 5,		
Aprisa, Inc.				
Patent Number	Date Patent Issued	. 1		
6,983,236	January 3, 2006	:		
Title of Invention				
		·		
Method for System-Constraint-Based Selection	for Design Components			
Lhereby disclaim the following complete claims in the above identified patent:				
Tiology decision and temperature desired and the second se		- 1203-1-15-15-15-15-15-15-15-15-15-15-15-15-1		
		-क्र-प्रदा न्या म ्यहर		
•		• • • • • • • • • • • • • • • • • • • •		
The extent of my interest in said patent is (if assignee of record, sassignment is recorded): Assignee of record (Reel/Fr	tate liber and page, or reel and ma ame: 015482/0892)	ame, where		
assignment is recorded). The Estates of Letter (1992)				
The fee for this disclaimer is set forth in 37 CFR 1.20(d).		T.m 7V-11		
The fee for this disclaimer is set forth in 37 CPK 1.20(d).				
Patentee claims small entity status. See 37 CFR 1.27.		·		
Small entity status has already been established in this case	se, and is still proper.			
X A check in the amount of the fee is enclosed.		i		
Payment by credit card. Form PTO-2038 is attached.				
The Director is hereby authorized to charge any fees which may be required or credit any				
overpayment to Deposit Account No.	•	4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4		
WARNING: Information on this form may become publ	ic, Credit card information shou	uid not		
be included on this form. Provide credit card informati	on and addionzation on P10-20	J30.		
Signed at Solon, State of Onco	this 24th day of Septe	mber 20 08		
orgino at, out of,	5.10 <u>32 31</u> 00) 0.			
Olte astomas				
Signature Registration				
Rus A TI		applicable		
Typed or printed name of patentee/ attorney or agent	of moord Tak	ephone Number		
typed or printed name of patentees attorney of agent	ur rownu 198	Phone Hamber		
28925 Fountain Parkway				
Address				
Solon, Ohio 44139	Country on applicable	 :		
City, State, Zip Code or Foreign	Country as applicable	1		
		[

This collection of information is required by 37 CFR 1.321. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including pattering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Tradement Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in complating the form, call 1-800-PTO-9199 and select option 2.